



**House Bill No. 6893**

**Public Act No. 07-155**

**AN ACT CONCERNING EXPANDED OUTREACH AND  
COMMUNICATION ACTIVITIES BY THE CHOICES HEALTH  
INSURANCE ASSISTANCE PROGRAM.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Subsection (b) of section 17b-427 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2007*):

(b) The Department of Social Services shall administer the CHOICES health insurance assistance program, which shall be a comprehensive Medicare advocacy program that provides assistance to Connecticut residents who are Medicare beneficiaries. The program shall: (1) Maintain a toll-free telephone number to provide advice and information on Medicare benefits, including prescription drug benefits available through the Medicare Part D program, the Medicare appeals process, [and other] health insurance matters applicable to Medicare beneficiaries and long-term care options available in the state at least five days per week during normal business hours; (2) provide information, advice and representation, where appropriate, concerning the Medicare appeals process, by a qualified attorney or paralegal at least five days per week during normal business hours; (3) prepare and distribute written materials to Medicare beneficiaries, their families,

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senior citizens and organizations regarding Medicare benefits, including prescription drug benefits available through the Medicare Part D program and long-term care options available in the state; (4) develop and distribute a Connecticut Medicare consumers guide, after consultation with the Insurance Commissioner and other organizations involved in servicing, representing or advocating for Medicare beneficiaries, which shall be available to any individual, upon request, and shall include: (A) Information permitting beneficiaries to compare their options for delivery of Medicare services; (B) information concerning the Medicare plans available to beneficiaries, including the traditional Medicare fee-for-service plan, Medicare Part D plans and the benefits and services available through each plan; (C) information concerning the procedure to appeal a denial of care and the procedure to request an expedited appeal of a denial of care; (D) information concerning private insurance policies and federal and state-funded programs that are available to supplement Medicare coverage for beneficiaries; (E) a worksheet for beneficiaries to use to evaluate the various plans, including Medicare Part D programs; and (F) any other information the program deems relevant to beneficiaries; [and] (5) collaborate with other state agencies and entities in the development of consumer-oriented websites that provide information on Medicare plans, including Medicare Part D plans, and long-term care options that are available in the state; and (6) include any functions the department deems necessary to conform to federal grant requirements.

Sec. 2. Section 17b-367 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2007*):

The Office of Policy and Management, within existing budgetary resources and in consultation with the Select Committee on Aging, the Commission on Aging, personnel designated by the Commissioner of Social Services who administer the CHOICES health insurance assistance program and the Long-Term Care Advisory Council, shall

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develop a single consumer-oriented Internet website that provides comprehensive information on long-term care options that are available in Connecticut. The website shall also include direct links and referral information regarding long-term care resources, including private and nonprofit organizations offering advice, counseling and legal services.

Approved June 25, 2007